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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:	May 31, 2005			
Estimated average burden				
hours per respon	se 16.00			

SEC USE ONLY				
Prefix		Serial		
DATE RECEIVED				
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UNIFORM 1	LIMITED OFFERING EXEMI	PTION
Name of Offering (check if this is an amendment at APM-Torrey Pines Fund, L.P.	nd name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Type of Filing: New Filing Amendment	Rule 505 Rule 506 Section 4(6)	ULOE
	A. BASIC IDENTIFICATION DATA	04048738
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and I	name has changed, and indicate change.)	
APM-Torrey Pines Fund, L.P.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1202 Bergen Parkway, Suite 212 Evergreen, CO 80439		303-674-1328
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
investment in and speculative trading of sescurities.		
	tnership, already formed other (pl tnership, to be formed	lease specify): PROCESSED NOV 0-2 2004
Actual or Estimated Date of Incorporation or Organization Jurisdiction of Incorporation or Organization: (Enter two-		nated States
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities 77d(6).	in reliance on an exemption under Regulation D or	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 day and Exchange Commission (SEC) on the earlier of the date which it is due, on the date it was mailed by United States	e it is received by the SEC at the address given bel	
Where To File: U.S. Securities and Exchange Commissio	n, 450 Fifth Street, N.W., Washington, D.C. 205-	49.
Copies Required: Five (5) copies of this notice must be fi photocopies of the manually signed copy or bear typed or		signed. Any copies not manually signed must be
Information Required: A new filing must contain all information, the information requested in Part C, and any material not be filed with the SEC.		
Filing Fee: There is no federal filing fee.		

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Ø Managing Partner Altegris Portfolio Management, Inc. Full Name (Last name first, if individual) 1202 Bergen Parkway, Suite 212, Evergreen, Colorado 80439-9559 Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Amedeo, Robert J. Full Name (Last name first, if individual) 1202 Bergen Parkway, Suite 212, Evergreen, Colorado 80439-9559 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Sundt, Jon C. Full Name (Last name first, if individual) 1020 Prospect Street, Suite 405, La Jolla, California 92037 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Beneficial Owner Director Promoter General and/or Managing Partner Osborne, Matthew C. Full Name (Last name first, if individual) 1020 Prospect Street, Suite 405, La Jolla, California 92037 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Pfister, Richard G. Full Name (Last name first, if individual) 1020 Prospect Street, Suite 405, La Jolla, California 92037 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner **Executive Officer** General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

3333	B. INFORMATION ABOUT OFFERING					
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	N∘ ⊠			
	_					
2.	2. What is the minimum investment that will be accepted from any individual?					
3.	Does the offering permit joint ownership of a single unit?	Yes	No			
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any					
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.					
	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such					
	a broker or dealer, you may set forth the information for that broker or dealer only.					
	Il Name (Last name first, if individual)					
	egris Investments, Inc. siness or Residence Address (Number and Street, City, State, Zip Code)					
	20 Prospect Street, Suite 405, La Jolla, California 92037					
	me of Associated Broker or Dealer					
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	(Check "All States" or check individual States)	All	States			
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	MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	OR WY	PA			
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Ful	Full Name (Last name first, if individual)					
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Dila		•
	Debt		\$
	Equity		\$
			•
	Convertible Securities (including warrants)		\$
	Partnership Interests \$		
	Other (Specify		\$
	Total	100,000,000.00	\$ 6,164,000.00
2			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	25	\$ 6,164,000.00
	Non-accredited Investors	0	\$ 0.00
	Total (for filings under Rule 504 only)	0	\$ 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		
	Regulation A		\$
	Rule 504		_ \$
	Total		_ \$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	🛛	\$ 0.00
	Printing and Engraving Costs	🖂	\$ 0.00
	Legal Fees		\$ 15,000.00
	Accounting Fees		\$ 0.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 2,000,000.00
	Other Expenses (identify) escrow, postage and state filing fees		\$ 10,000.00
	Total		\$ 2,025,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price given in response to Part C—Question and total expenses furnished in response to Part C—Question 4.a. This difference is the "adjusted g proceeds to the issuer."	ross		\$ 97,975,000.00
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted graph proceeds to the issuer set forth in response to Part C—Question 4.b above.	and		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	🗆	s	s
	Purchase of real estate	🗀	\$	<u></u> \$
	Purchase, rental or leasing and installation of machinery and equipment		s	□s
	Construction or leasing of plant buildings and facilities			
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)			
	Repayment of indebtedness			
	Working capital		\s	. U •
	Other (specify): investment in and speculative trading of sescurities] \$] \$	\$ 97,975,000.00
	(c)	L.		
		[] \$	s
	Column Totals	[] \$	\$ 97,975,000.00
	Total Payments Listed (column totals added)		<u>\$9</u>	7,975,000.00
	D. FEDERAL SIGNATURE			
sig	te issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Core information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	nmissi	on, upon writte	
	Super (Print or Type) Signature	D	10/25/	04
_	PM-Torrey Pines Fund, L.P. Title of Signer (Print or Type) Title of Signer (Print or Type)		100/	
0.7	obert J. Amedeo Vice tresident of Altegris Portfolio Managment,	mc, ge	neral partner of E	SSUCT

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)